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APR 23 2008

BOARD OF PHARMACY

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By: Marianne W. Greenwald Deputy Attorney General Tel. No. (973) 648-4876

STATE OF NEW JERSEY
DEPARTMENT OF LAW & PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
STATE BOARD OF PHARMACY

IN THE MATTER OF THE SUSPENSION OR REVOCATION OF THE LICENSE OF

Administrative Action

PAUL ZAMEROWSKI, R.PH

CONSENT ORDER

License No. 28R102652200

TO PRACTICE PHARMACY IN THE STATE OF NEW JERSEY

This matter was opened to the New Jersey State Board of Pharmacy upon the receipt of information that respondent had allegedly diverted controlled dangerous substances from his employer Cherry Hill Pharmacy, Cherry Hill, New Jersey. On March 12, 2008 respondent appeared before the full Board with counsel, Steven Kern, Esq., and was accompanied by Dr. Reading of the Professional Assistance Program ("PAP"). It appears that respondent has been in ongoing recovery for seven (7) years and suffered a relapse beginning January 2007 and lasting through March 2007 following hip replacement in November of 2006. The PAP fully supports the continuance of respondent's licensure contingent upon his continued compliance with all PAP conditions and monitoring. Respondent,

being desirous of resolving this matter without the necessity of further formal proceedings, and agreeing to waive any right to same, and the Board having determined that this Order is sufficiently protective of the public health, safety and welfare; and all parties agreeing to the terms of this Order,

IT IS THEREFORE ON THIS 18th DAY OF APRIL 2008, ORDERED AND AGREED THAT:

- 1. Respondent shall continue to participate in the Professional Assistance Program for no less that two (2) years to commence on the filing date of this Order. Should respondent violate any of the conditions set forth below the Board may take disciplinary action.
- 2. (a) Respondent shall submit to directly witnessed random urine monitoring a minimum of two (2) times per week at a laboratory facility approved by the Board for the initial six (6) months from the date of entry of this Order and a minimum of one (1) week time per for the eighteen (18) months thereafter. The urine monitoring shall be conducted with direct witnessing of the taking of the samples as designed by the laboratory facility. The initial drug screen of each sample shall utilize appropriate screening techniques and all confirming tests and/or secondary tests will be performed by gas/chromatography/mass spectrometry (G.C./M.S.). The testing procedure shall include a forensic chain of custody protocol to ensure sample integrity and to provide documentation in the event of a legal challenge.

- (b) All test results including any secondary test results shall be provided directly to Joanne Boyer, Executive Director of the Board, or her designee in the event she is unavailable. The Board will retain sole discretion to modify the manner of testing in the event technical developments or individual requirements indicate that a different methodology or approach is required in order to guarantee the accuracy and reliability of the testing. Upon receipt of any positive urine screen, the Board reserves the right to amend the within order or to take action as provided in paragraph 7 below.
- (c) Any failure by respondent to submit or provide a urine sample within twenty-four (24) hours of a request will be deemed to be equivalent to a confirmed positive urine test. In the event respondent is unable to appear for a scheduled urine test or provide a urine sample due to illness or other impossibility, consent to waive that day's test must be secured from Joanne Boyer or her designee. Personnel at the lab facility shall not be authorized to waive a urine test. In addition, respondent must provide the Board with written substantiation of his inability to appear for a test within two (2) days, e.g. a physician's report attesting that he was so ill that he was unable to provide the urine sample or appear for the test. "Impossibility" as employed in this provision shall mean an obstacle beyond the control of respondent that is so insurmountable or that makes appearance for the test or provision of the urine sample so infeasible that a reasonable person would not withhold consent to waive the test on that day.
- (d) In the event respondent will be out of the State for any reason, the Board shall be so advised by respondent and PAP

so that arrangements may be made at the Board's discretion for alternate testing. The Board may, in its sole discretion, modify the frequency of testing or method of testing during the monitoring period.

- (e) Any urine test result showing creatinine levels below 20 mg/dL and a specific gravity below 1.009 shall create a rebuttable presumption of a confirmed positive urine test. Such a specimen shall be immediately subjected to the confirming GC/MS test.
- (f) Respondent shall familiarize himself with all foods, food additives or other products (such as poppy seeds) which may affect the validity of urine screens, be presumed to possess that knowledge, and shall refrain from the use of such substances. Ingestion of such substances shall not be an acceptable reason for a positive urine screen and/or failure to comply with the urine monitoring program.
- 4. Respondent shall abstain from all psychoactive substances, including alcohol and controlled dangerous substances, and shall not possess any controlled dangerous substances except pursuant to a bona fide prescription written by a physician or dentist for good medical or dental cause in his own treatment. In addition, respondent shall advise any and all treating physicians and/or dentists of his history of substance abuse. Respondent shall cause any physician or dentist who prescribes medication for him which is a controlled dangerous substance to provide a written report to the Board together with patient records indicating the need for such medication. Such report shall be provided to the Board no later than two (2) days subsequent to the prescription in

order to avoid confusion which may be caused by a confirmed positive urine test as a result of such medication.

- 5. Respondent shall attend Alcoholics Anonymous/Narcotics Anonymous ("AA/NA") meetings or its equivalent at a minimum frequency of three (3) times per week for the duration of the two year monitoring period at a minimum. Respondent shall provide evidence of attendance at such groups directly to the board on a monthly basis. If respondent discontinues attendance at any of the support groups without obtaining approval of the Board he shall be deemed in violation of this Order.
- 6. Respondent shall provide any and all releases to any and all parties who are participating in the monitoring and treatment of respondent as may be required in order that all reports, records, and other pertinent information may be provided to, and utilized by the Board in a timely manner.
- 7. Respondent shall not be a preceptor or a pharmacist-in-charge and shall be barred from being a permit holder either directly or indirectly through connection with any person related by blood or marriage for the two year period of monitoring commencing on the entry of this Order.
- 8. (a) Respondent shall be subject to an Order of automatic suspension of his license upon the Board's receipt of any information which the Board, in its sole discretion, deems reliable demonstrating that respondent has failed to comply with any of the conditions set forth in this Order including but not limited to report of a confirmed positive urine or a <u>prima facie</u> showing of a relapse or recurrence of alcohol or drug abuse.

(b) Respondent shall have a right to apply for removal of the automatic suspension on ten (10) days notice to the board and to the Attorney General. The Board may hold a hearing on that application before the full Board or before a committee of the Board. In the event a committee hears the application, its action shall be subject to ratification of the full Board at its next scheduled meeting. In a hearing seeking removal of the automatic suspension, any confirmed positive urine shall be presumed valid.

9. Respondent shall maintain continued enrollment and face-to-face follow up with a clinical representative of the PAPNJ for the two year monitoring period, with quarterly reports to be provided by the PAPNJ to the Executive Director of the Board with immediate notice to the Board of any relapse.

NEW JERSEY STATE BOARD OF PHARMACY

y: Edward H. N.

Edward G. McGinley, R.Ph.

President

I have read the within Order, understand its terms and agree to be bound by them. I consent to entry of the Order by the Board of Pharmacy.

Paul Zamerowski, R.Ph.

Respondent

Consent as to form and entry

Steven Kern, Esq.

Counsel for Respondent